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TRADE the Par	perwork Reduction Act of 1995.	no persons are required to respond to a co Application Number	ollection of information unless it displays a valid	OMB control number.							
	ANSMITTAL	Filing Date	April 22, 2004								
• • • • • • • • • • • • • • • • • • • •	FORM	First Named Inventor	William David Schaefer								
	ı Oran	Art Unit	2635								
the beginning of fine	all assurance dense offer initial	Examiner Name	Timothy Edwards, Jr.								
	all correspondence after initial	3 Attorney Docket Number	37041-11449	41-11449							
Total Number of Pages in This Submission 13  ENCLOSURES (Check all that apply)											
✓ Fee Trans			After Allowance Com	nmunication to TC							
	smittal Form	Licensing-related Papers	Appeal Communicat of Appeals and Inter								
Amendme  Af  Af  Af  Extension  Express A  Information  Certified Coumen  Reply to Incomplet  Incomplet  Reply to Incomplet  Reply to Incomplet  Reply to Incomplet	fiter Final  fitidavits/declaration(s)  n of Time Request  Abandonment Request  on Disclosure Statement  Copy of Priority  t(s)  Vissing Parts/ te Application eply to Missing Parts nder 37 CFR 1.52 or 1.53	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence of Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on Co	Appeal Communicat (Appeal Notice, Brief, Proprietary Informati Status Letter Other Enclosure(s) (below): 1. Postcard	ion to TC Reply Brief) ion							
	SIGNA	TURE OF APPLICANT, ATTO	DRNEY, OR AGENT								
Firm Name	Jenner & Block LLP										
Signature	MMM										
Printed name	Mark P. Vrla										
Date	March 6, 2007 Reg. No. 43,973										
CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:											
Signature Maraso											
Typed or printed name Denise L. Maragos Date March 6, 2007											

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PTO/SB/17 (02-07)

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Effective on 12/08/2004.			Complete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number	pplication Number 10/829,493						
FEE TRANSMITTAL				Filing Date	April 22,	April 22, 2004				
Fo	or FY 2	007		First Named Inventor	William (	David Schae	efer			
			Examiner Name	Timothy	Timothy Edwards, Jr.					
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	2635	2635				
TOTAL AMOUNT OF PA	YMENT (\$)	1,570.00		Attorney Docket No.	37041-1	37041-11449				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 10-0460  Deposit Account Name: Jenner & Block LLP										
For the above-ider	ntified deposit	account, the Directo	or is her	eby authorized to: (che	eck all that ap	oply)	-			
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s)										
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card										
information and authorization on PTO-2038.  FEE CALCULATION										
	DCH AND	EVAMINATION F	CES		<del></del>					
BASIC FILING, SEARCH, AND EXAMINATION FEES     FILING FEES										
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity ) Fee (\$) F		l Entity e (\$)	Fees Pald (\$)			
Utility	300	150	500			00				
Design	200	100	100		30	55				
Plant	200	100	300	150	60 8	30				
Reissue	300	150	500	250	500 30	00				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FE	EES				,	<u>Sr</u> Fee (\$)	mall Entity			
Fee Description  Fach claim over 20	(including R	eissues)		•	50	<u>Fee (\$)</u> 25				
	Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100									
Multiple dependent claims 360 180										
Total Claims	Extra Clair			Paid (\$)	_	<u>lultiple Depe</u> Fee (\$)	ndent Claims Fee Paid (\$)			
27 - 20 or HP = HP = highest number of to		x 50 or, if greater than 20.	.=	350	,	<u> </u>	ree raid (\$)			
Indep. Claims	Extra Clair	<u>ns Fee (\$)</u>	Fee	Paid (\$)	_		<del></del>			
4 - 3 or HP = 1 x 200 = 200 HP = highest number of independent claims paid for, if greater than 3.										
3 APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x =										
4. OTHER FEE(S)  Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 3-month extension of time \$1,020										
SUBMITTED BY										
Signature	VIAXI	1		Registration No. (Attorney/Agent) 43,973	3	Telephone (	(312) 222-9350			
Name (Print/Type) Mark P. Vrla				onoj//gen/		Date March 6, 2007				

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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